


<b>INVITATION TO BID</b>  STATE OF LOUISIANA DIVISION OF ADMINISTRATION OFFICE OF STATE PURCHASING				BIDS WILL BE PUBLICLY OPENED:  <div style="font-size: 1.2em; font-weight: bold;">MAY 28, 2010    02:00 PM</div>	
=====> <b>VENDOR NO. :</b> <b>SOLICITATION :</b> 2240041 <b>FILE NO. :</b> Q426977 <b>OPENING DATE :</b> 05/28/10  <div style="border: 1px solid black; height: 80px; width: 100%; margin-top: 10px;"></div>		<b>PURCHASING AGENCY NO. :</b> 107001  <b>SEE NO. 8 BELOW. RETURN BID TO</b>  <div style="display: flex; justify-content: space-between;"> <span>2240041</span> <span>05/28/10</span> <span>02:00 PM Q426977</span> </div> <p><b>OFFICE OF STATE PURCHASING</b>  <b>OFFICE OF STATE PURCHASING</b>  <b>POST OFFICE BOX 94095</b>  <b>BATON ROUGE, LA 70804-9095</b></p>			
=====>		<div style="border: 1px solid black; height: 80px; width: 100%; margin-bottom: 10px;"></div> <p style="text-align: center; font-weight: bold; font-size: 1.1em;">FILL IN VENDOR NUMBER (FEIN), NAME AND ADDRESS ABOVE, BEFORE SUBMITTING BID.</p>			
<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p><b>BUYER :</b> AUGUSTINE JACKSON, CPPB</p> <p><b>BUYER PHONE :</b> (225) 342-8011</p> <p><b>DATE ISSUED :</b> 05/21/10</p> <p><b>REQ. AGENCY :</b> 400413</p> <p style="text-align: right;"><b>FOLD HERE--&gt;</b></p> </div> <div style="width: 50%;"> <p><b>HUNT CORRECTIONAL CENTER - GRANTS</b></p> <p><b>AGENCY REQ. NO. :</b> 400-0G713</p> <p><b>ISIS REQ. NO. :</b> 1332790</p> <p><b>VENDOR PHONE :</b></p> <p><b>FISCAL YEAR :</b> 10</p> <p><b>CLASS/SUBCLASS :</b> 46525</p> <p><b>SCHEDULED BEGIN DATE :</b> 00/00/00</p> <p><b>SCHEDULED END DATE :</b> 00/00/00</p> <p><b>T-NUMBER :</b></p> </div> </div>					
<b>MEDICAL EQUIPMENT ** THIS IS A FAX BID**</b> <b>HUNT CORRECTIONAL CENTER - GRANTS</b>					
<b>TO BE COMPLETED BY VENDOR</b>					
1. _____ PLEASE REMOVE FROM THIS COMMODITY CODE. 2. _____ DELIVERY WILL BE MADE IN THIS NUMBER OF DAYS AFTER RECEIPT OF ORDER. 3. _____ % CASH DISCOUNT FOR PROMPT PAYMENT IF MADE WITHIN THIRTY (30) DAYS. CASH DISCOUNTS FOR LESS THAN 30 DAYS OR LESS THAN 1% WILL BE ACCEPTED, BUT WILL NOT BE CONSIDERED IN DETERMINING AWARDS. ON INDEFINITE QUANTITY TERM CONTRACTS, CASH DISCOUNTS WILL BE ACCEPTED AND TAKEN BUT WILL NOT BE CONSIDERED IN DETERMINING AWARDS. 4. _____ BID BOND ATTACHED, _____ CERTIFIED CHECK ATTACHED, _____ OTHER, IF REQUIRED. 5. _____ BID REFERENCE NUMBER. (THIS NUMBER WILL APPEAR ON RESULTING ORDER OR CONTRACT).					
<b>INSTRUCTIONS TO BIDDERS</b>					
1. READ THE ENTIRE BID, INCLUDING ALL TERMS AND CONDITIONS AND SPECIFICATIONS. 2. ALL BID PRICES MUST BE TYPED OR WRITTEN IN INK. ANY CORRECTIONS, ERASURES OR OTHER FORMS OF ALTERATION TO UNIT PRICES SHOULD BE INITIALED BY THE BIDDER. 3. THIS BID IS TO BE MANUALLY SIGNED IN INK. <span style="float: right;">FOLD HERE--&gt;</span> 4. BID PRICES SHALL INCLUDE DELIVERY OF ALL ITEMS F.O.B. DESTINATION OR AS OTHERWISE PROVIDED. BIDS CONTAINING "PAYMENT IN ADVANCE" OR "C.O.D" REQUIREMENTS MAY BE REJECTED. PAYMENT IS TO BE MADE WITHIN 30 DAYS AFTER RECEIPT OF PROPERLY EXECUTED INVOICE OR DELIVERY, WHICHEVER IS LATER. 5. AMOUNT OF BID BOND REQUIRED: _____ N/A _____ . 6. AMOUNT OF PERFORMANCE BOND, IF REQUIRED. _____ OR _____ 0% _____ OF BID. 7. DESIRED DELIVERY: _____ 015DAYS ARO 8. TO ASSURE CONSIDERATION OF YOUR BID, ALL BIDS AND ADDENDA SHOULD BE RETURNED IN AN ENVELOPE OR PACKAGE CLEARLY MARKED WITH THE BID OPENING DATE AND THE BID NUMBER, OR SUBMITTED IN THE SPECIAL ENVELOPE IF FURNISHED FOR THAT PURPOSE. 9. BIDS SUBMITTED ARE SUBJECT TO PROVISIONS OF THE LAWS OF THE STATE OF LOUISIANA INCLUDING BUT NOT LIMITED TO L.R.S. 39:1551-1736; PURCHASING RULES AND REGULATIONS; EXECUTIVE ORDERS; STANDARD TERMS AND CONDITIONS; SPECIAL CONDITIONS; AND SPECIFICATIONS LISTED IN THIS SOLICITATION. 10. IMPORTANT: BY SIGNING THE BID, THE BIDDER CERTIFIES COMPLIANCE WITH ALL INSTRUCTIONS TO BIDDERS, TERMS, CONDITIONS AND SPECIFICATIONS, AND FURTHER CERTIFIES THAT THIS BID IS MADE WITHOUT COLLUSION OR FRAUD. THIS BID IS TO BE MANUALLY SIGNED IN INK BY A PERSON AUTHORIZED TO BIND THE VENDOR (SEE NO.30). ALL BID INFORMATION SHALL BE MADE WITH INK OR TYPEWRITTEN.					
<b>VENDOR PHONE NUMBER:</b> <b>FAX NUMBER:</b>		<b>TITLE</b>		<b>DATE</b>	
<b>SIGNATURE OF AUTHORIZED BIDDER - SEE NO. 30, PAGE 3.</b> <b>(MUST BE SIGNED)</b>			<b>NAME OF BIDDER</b> <b>(TYPED OR PRINTED)</b>		

STANDARD TERMS & CONDITIONS		INVITATION TO BID	
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<p>11 ADDRESS ALL INQUIRIES AND CORRESPONDENCE TO THE BUYER AT THE PHONE AND ADDRESS SHOWN ABOVE.</p> <p>12. CONFERENCE: NA NA NA</p> <p>13. BID FORMS. ALL WRITTEN BIDS, UNLESS OTHERWISE PROVIDED FOR, MUST BE SUBMITTED ON, AND IN ACCORDANCE WITH, FORMS PROVIDED, PROPERLY SIGNED (SEE NO. 30). BIDS SUBMITTED IN THE FOLLOWING MANNER WILL NOT BE ACCEPTED: A. BID CONTAINS NO SIGNATURE INDICATING INTENT TO BE BOUND; B. BID FILLED OUT IN PENCIL; AND C. BID NOT SUBMITTED ON THE STATE'S STANDARD FORMS.</p> <p>BIDS MUST BE RECEIVED AT THE ADDRESS SPECIFIED IN THE SOLICITATION PRIOR TO BID OPENING TIME IN ORDER TO BE CONSIDERED. TELEGRAPHIC AND FAX ALTERATIONS TO BIDS RECEIVED BEFORE BID OPENING TIME WILL BE CONSIDERED PROVIDED FORMAL BID AND WRITTEN ALTERATION HAVE BEEN RECEIVED AND TIME-STAMPED BEFORE BID OPENING TIME. ENTIRE BID SHOULD BE RETURNED, EXCEPT ITEM PAGES NOT BID.</p> <p>14. STANDARDS OF QUALITY. ANY PRODUCT OR SERVICE BID SHALL CONFORM TO ALL APPLICABLE FEDERAL AND STATE LAWS AND REGULATIONS AND THE SPECIFICATIONS CONTAINED IN THE SOLICITATION. UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION, ANY MANUFACTURER'S NAME, TRADE NAME, BRAND NAME, OR CATALOG NUMBER USED IN THE SPECIFICATION IS FOR THE PURPOSE OF DESCRIBING THE STANDARD OF QUALITY, PERFORMANCE, AND CHARACTERISTICS DESIRED AND IS NOT INTENDED TO LIMIT OR RESTRICT COMPETITION. BIDDER MUST SPECIFY THE BRAND AND MODEL NUMBER OF THE PRODUCT OFFERED IN HIS BID. BIDS NOT SPECIFYING BRAND AND MODEL NUMBER SHALL BE CONSIDERED AS OFFERING THE EXACT PRODUCTS SPECIFIED IN THE SOLICITATION.</p> <p>15. DESCRIPTIVE INFORMATION. BIDDERS PROPOSING AN EQUIVALENT BRAND OR MODEL SHOULD SUBMIT WITH THE BID INFORMATION (SUCH AS ILLUSTRATIONS, DESCRIPTIVE LITERATURE, TECHNICAL DATA) SUFFICIENT FOR STATE OF LOUISIANA TO EVALUATE QUALITY, SUITABILITY, AND COMPLIANCE WITH THE SPECIFICATIONS IN THE SOLICITATION. FAILURE TO SUBMIT DESCRIPTIVE INFORMATION MAY CAUSE BID TO BE REJECTED. ANY CHANGE MADE TO A MANUFACTURER'S PUBLISHED SPECIFICATIONS SUBMITTED FOR A PRODUCT SHALL BE VERIFIABLE BY THE MANUFACTURER. IF ITEM(S) BID DO NOT FULLY COMPLY WITH SPECIFICATIONS (INCLUDING BRAND AND/OR PRODUCT NUMBER), BIDDER MUST STATE IN WHAT RESPECT ITEM(S) DEVIATE. FAILURE TO NOTE EXCEPTIONS ON THE BID FORM WILL NOT RELIEVE THE SUCCESSFUL BIDDER(S) FROM SUPPLYING THE ACTUAL PRODUCTS REQUESTED.</p> <p>16. BID OPENING. BIDDERS MAY ATTEND THE BID OPENING, BUT NO INFORMATION OR OPINIONS CONCERNING THE ULTIMATE CONTRACT AWARD WILL BE GIVEN AT THE BID OPENING OR DURING THE EVALUATION PROCESS. BIDS MAY BE EXAMINED WITHIN 72 HOURS AFTER BID OPENING. INFORMATION PERTAINING TO COMPLETED FILES MAY BE SECURED BY VISITING THE STATE OF LOUISIANA DURING NORMAL WORKING HOURS. WRITTEN BID TABULATIONS WILL NOT BE FURNISHED.</p> <p>17. AWARDS. THE STATE OF LOUISIANA RESERVES THE RIGHT TO AWARD ITEMS SEPARATELY, GROUPED OR ON AN ALL-OR-NONE BASIS AND TO REJECT ANY OR ALL BIDS AND WAIVE ANY INFORMALITIES.</p> <p>18. PRICES . UNLESS OTHERWISE SPECIFIED BY THE STATE OF LOUISIANA IN THE SOLICITATION, BID PRICES MUST BE COMPLETE, INCLUDING TRANSPORTATION PREPAID BY BIDDER TO DESTINATION AND FIRM FOR ACCEPTANCE FOR A MINIMUM OF 30 DAYS. IF ACCEPTED, PRICES MUST BE FIRM FOR THE CONTRACTUAL PERIOD. BIDS OTHER THAN F.O.B. DESTINATION MAY BE REJECTED. PRICES SHOULD BE QUOTED IN THE UNIT (EACH, BOX, CASE, ETC.) AS SPECIFIED IN THE SOLICITATION.</p> <p>19. DELIVERIES. BIDS MAY BE REJECTED IF THE DELIVERY TIME INDICATED IS LONGER THAN THAT SPECIFIED IN THE SOLICITATION.</p> <p>20. TAXES. VENDOR IS RESPONSIBLE FOR INCLUDING ALL APPLICABLE TAXES IN THE BID PRICE. STATE AGENCIES ARE EXEMPT FROM ALL STATE AND LOCAL SALES AND USE TAXES.</p>			

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<p>21. NEW PRODUCTS.          UNLESS SPECIFICALLY CALLED FOR IN THE SOLICITATION, ALL PRODUCTS FOR PURCHASE MUST BE NEW, NEVER PREVIOUSLY USED, AND THE CURRENT MODEL AND/OR PACKAGING. NO REMANUFACTURED, DEMONSTRATOR, USED OR IRREGULAR PRODUCT WILL BE CONSIDERED FOR PURCHASE UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION. THE MANUFACTURER'S STANDARD WARRANTY WILL APPLY UNLESS OTHERWISE SPECIFIED IN THE SOLICITATION.</p> <p>22. CONTRACT RENEWALS.          UPON AGREEMENT OF THE STATE OF LOUISIANA AGENCY AND THE CONTRACTOR, A TERM CONTRACT MAY BE EXTENDED FOR 2 ADDITIONAL 12-MONTH PERIODS AT THE SAME PRICES, TERMS AND CONDITIONS. IN SUCH CASES, THE TOTAL CONTRACT TERM CANNOT EXCEED 36 MONTHS.</p> <p>23. CONTRACT CANCELLATION.          THE STATE OF LOUISIANA HAS THE RIGHT TO CANCEL ANY CONTRACT, IN ACCORDANCE WITH PURCHASING RULES AND REGULATIONS, FOR CAUSE, INCLUDING BUT NOT LIMITED TO, THE FOLLOWING: (1) FAILURE TO DELIVER WITHIN THE TIME SPECIFIED IN THE CONTRACT; (2) FAILURE OF THE PRODUCT OR SERVICE TO MEET SPECIFICATIONS, CONFORM TO SAMPLE QUALITY OR TO BE DELIVERED IN GOOD CONDITION; (3) MISREPRESENTATION BY THE CONTRACTOR; (4) FRAUD, COLLUSION, CONSPIRACY OR OTHER UNLAWFUL MEANS OF OBTAINING ANY CONTRACT WITH THE STATE; (5) CONFLICT OF CONTRACT PROVISIONS WITH CONSTITUTIONAL OR STATUTORY PROVISIONS OF STATE OR FEDERAL LAW; (6) ANY OTHER BREACH OF CONTRACT.</p> <p>24. DEFAULT OF CONTRACTOR.          FAILURE TO DELIVER WITHIN THE TIME SPECIFIED IN THE BID WILL CONSTITUTE A DEFAULT AND MAY CAUSE CANCELLATION OF THE CONTRACT. WHERE THE STATE HAS DETERMINED THE CONTRACTOR TO BE IN DEFAULT, THE STATE RESERVES THE RIGHT TO PURCHASE ANY OR ALL PRODUCTS OR SERVICES COVERED BY THE CONTRACT ON THE OPEN MARKET AND TO CHARGE THE CONTRACTOR WITH COST IN EXCESS OF THE CONTRACT PRICE. UNTIL SUCH ASSESSED CHARGES HAVE BEEN PAID, NO SUBSEQUENT BID FROM THE DEFAULTING CONTRACTOR WILL BE CONSIDERED.</p> <p>25. ORDER OF PRIORITY.          IN THE EVENT THERE IS A CONFLICT BETWEEN THE INSTRUCTIONS TO BIDDERS OR STANDARD CONDITIONS AND THE SPECIAL CONDITIONS, THE SPECIAL CONDITIONS SHALL GOVERN.</p> <p>26. APPLICABLE LAW.          ALL CONTRACTS SHALL BE CONSTRUED IN ACCORDANCE WITH AND GOVERNED BY THE LAWS OF THE STATE OF LOUISIANA.</p> <p>27. COMPLIANCE WITH CIVIL RIGHTS LAWS.          BY SUBMITTING AND SIGNING THIS BID, BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE FOLLOWING AS APPLICABLE: TITLE VI AND VII OF THE CIVIL RIGHTS ACT OF 1964, AS AMENDED BY THE EQUAL OPPORTUNITY ACT OF 1972, FEDERAL EXECUTIVE ORDER 11246, FEDERAL REHABILITATION ACT OF 1973, AS AMENDED, THE VETERAN'S READJUSTMENT ASSISTANCE ACT OF 1974, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE ACT OF 1975, AND BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE AMERICANS WITH DISABILITIES ACT OF 1990. BIDDER AGREES NOT TO DISCRIMINATE IN ITS EMPLOYMENT PRACTICES, AND WILL RENDER SERVICES UNDER ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION WITHOUT REGARD TO RACE, COLOR, RELIGION, SEXUAL ORIENTATION, NATIONAL ORIGIN, VETERAN STATUS, POLITICAL AFFILIATION, OR DISABILITIES. ANY ACT OF DISCRIMINATION COMMITTED BY BIDDER, OR FAILURE TO COMPLY WITH THESE STATUTORY OBLIGATIONS WHEN APPLICABLE, SHALL BE GROUNDS FOR TERMINATION OF ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION.</p> <p>28. SPECIAL ACCOMMODATION.          ANY "QUALIFIED INDIVIDUAL WITH A DISABILITY" AS DEFINED BY THE AMERICANS WITH DISABILITIES ACT WHO HAS SUBMITTED A BID AND DESIRES TO ATTEND THE BID OPENING, MUST NOTIFY THIS OFFICE IN WRITING NOT LATER THAN SEVEN DAYS PRIOR TO THE BID OPENING DATE OF THEIR NEED FOR SPECIAL ACCOMMODATIONS. IF THE REQUEST CANNOT BE REASONABLY PROVIDED, THE INDIVIDUAL WILL BE INFORMED PRIOR TO THE BID OPENING.</p> <p>29. INDEMNITY.          CONTRACTOR AGREES, UPON RECEIPT OF WRITTEN NOTICE OF A CLAIM OR ACTION, TO DEFEND THE CLAIM OR ACTION, OR TAKE OTHER APPROPRIATE MEASURE, TO INDEMNIFY, AND HOLD HARMLESS, THE STATE, ITS OFFICERS, ITS AGENTS AND ITS EMPLOYEES FROM AND AGAINST ALL CLAIMS AND ACTIONS FOR BODILY INJURY, DEATH OR PROPERTY DAMAGES CAUSED BY THE FAULT OF THE CONTRACTOR, ITS OFFICERS, ITS AGENTS, OR ITS EMPLOYEES. CONTRACTOR IS OBLIGATED TO INDEMNIFY ONLY TO THE EXTENT OF THE FAULT OF THE CONTRACTOR, ITS OFFICERS, ITS AGENTS, OR ITS EMPLOYEES. HOWEVER, THE CONTRACTOR SHALL HAVE NO OBLIGATION AS SET FORTH ABOVE WITH RESPECT TO ANY CLAIM OR ACTION FROM BODILY INJURY, DEATH OR PROPERTY DAMAGES ARISING OUT OF THE FAULT OF THE STATE, ITS OFFICERS, ITS AGENTS OR ITS EMPLOYEES.</p> <p>30. SIGNATURE AUTHORITY.          IN ACCORDANCE WITH L.R.S. 39:1594 (ACT 121), THE PERSON SIGNING THE BID MUST BE:</p> <ol style="list-style-type: none"> <li>1. A CURRENT CORPORATE OFFICER, PARTNERSHIP MEMBER OR OTHER INDIVIDUAL SPECIFICALLY AUTHORIZED TO SUBMIT A BID AS REFLECTED IN THE APPROPRIATE RECORDS ON FILE WITH THE SECRETARY OF STATE; OR</li> <li>2. AN INDIVIDUAL AUTHORIZED TO BIND THE VENDOR AS REFLECTED BY A CORPORATE RESOLUTION, CERTIFICATE OR AFFIDAVIT; OR</li> <li>3. OTHER DOCUMENTS INDICATING AUTHORITY WHICH ARE ACCEPTABLE TO THE PUBLIC ENTITY.</li> </ol>			

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BID DELIVERY INSTRUCTIONS

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THIS IS A FAX BID. BIDS ARE TO BE SUBMITTED VIA FAX TO OUR FAX NUMBER 225/342-8688.

ALL BIDS MUST BE RECEIVED NO LATER THAN 2:00 P.M. CDST, FRIDAY, MAY 28, 2010.

THE OFFICE OF STATE PURCHASING FACSIMILE MACHINE TIME AND DATE STAMP WILL BE THE OFFICIAL RECEIPT TIME OF ALL BIDS RECEIVED. ANY BID RECEIVED AFTER 2:00 P.M. WILL NOT BE CONSIDERED FOR AWARD.

\*\*\*\*\* FOR QUESTIONS AND INQUIRIES \*\*\*\*\*

SUBMIT QUESTIONS/INQUIRIES VIA EMAIL TO: AUGUSTINE.JACKSON@LA.GOV

2

TERMS AND CONDITIONS. THIS SOLICITATION CONTAINS ALL TERMS AND CONDITIONS WITH RESPECT TO THE COMMODITIES HEREIN. ANY VENDOR CONTRACTS, FORMS, TERMS OR OTHER MATERIALS SUBMITTED WITH BID MAY CAUSE BID TO BE REJECTED.

3

VENDOR'S FORMS. THE PURCHASE/RELEASE ORDER IS THE ONLY BINDING DOCUMENT TO BE ISSUED AGAINST THIS CONTRACT. SIGNING OF VENDOR'S FORMS IS NOT ALLOWED.

4

INVOICES. INVOICES WILL BE SUBMITTED BY THE CONTRACTOR TO THE USING AGENCY AND THE INVOICE SHALL REFER TO THE DELIVERY TICKET NUMBER, DELIVERY DATE, PURCHASE/RELEASE ORDER NUMBER. QUANTITY, UNIT PRICE, AND DELIVERY POINT. A SEPARATE INVOICE FOR EACH ORDER DELIVERED AND ACCEPTED SHALL BE SUBMITTED BY THE CONTRACTOR IN DUPLICATE DIRECTLY TO THE ACCOUNTING DEPARTMENT OF THE USING AGENCY. INVOICES SHALL SHOW THE AMOUNT OF ANY CASH DISCOUNT AND SHALL BE SUBMITTED ON THE CONTRACTOR'S OWN INVOICE FORM.

5

PAYMENT. PAYMENT WILL BE MADE ON THE BASIS OF UNIT PRICE AS LISTED IN THIS CONTRACT; SUCH PRICE AND PAYMENT WILL CONSTITUTE FULL COMPENSATION FOR FURNISHING AND DELIVERING THE CONTRACT COMMODITIES. IN NO CASE WILL THE STATE AGENCY REFUSE TO MAKE PARTIAL PAYMENTS TO THE CONTRACTOR ALTHOUGH ALL ITEMS HAVE NOT BEEN DELIVERED. THIS PAYMENT IN NO WAY RELIEVES THE CONTRACTOR OF HIS RESPONSIBILITY TO EFFECT SHIPMENT OF THE BALANCE OF THE ORDER. PAYMENT WILL BE TO VENDOR AND ADDRESS AS SHOWN ON ORDER.

6

COMPLIANCE WITH CIVIL RIGHTS LAWS. BY SUBMITTING AND SIGNING THIS SOLICITATION, THE BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE FOLLOWING AS APPLICABLE: TITLE VI AND TITLE VII OF THE CIVIL RIGHTS ACT OF 1964, AS AMENDED BY THE EQUAL OPPORTUNITY ACT OF 1972, FEDERAL EXECUTIVE ORDER 11246, THE FEDERAL REHABILITATION ACT OF 1973, AS AMENDED, THE VIETNAM ERA VETERAN'S READJUSTMENT ASSISTANCE ACT OF 1974, TITLE IX OF THE EDUCATION AMENDMENTS OF 1972, THE AGE ACT OF

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<p>1975, AND BIDDER AGREES TO ABIDE BY THE REQUIREMENTS OF THE AMERICANS WITH DISABILITIES ACT OF 1990. BIDDER AGREES NOT TO DISCRIMINATE IN ITS EMPLOYMENT PRACTICES, AND WILL RENDER SERVICES UNDER ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION, WITHOUT REGARD TO RACE, COLOR, RELIGION, SEX, NATIONAL ORIGIN, VETERAN STATUS, POLITICAL AFFILIATION, OR DISABILITIES. ANY ACT OF DISCRIMINATION COMMITTED BY BIDDER, OR FAILURE TO COMPLY WITH THESE STATUTORY OBLIGATIONS WHEN APPLICABLE, SHALL BE GROUNDS FOR TERMINATION OF ANY CONTRACT ENTERED INTO AS A RESULT OF THIS SOLICITATION.</p> <p>7 PREFERENCE. IN ACCORDANCE WITH LOUISIANA REVISED STATUTES 39:1595, A PREFERENCE MAY BE ALLOWED FOR PRODUCTS MANUFACTURED, PRODUCED, GROWN, OR ASSEMBLED IN LOUISIANA OF EQUAL QUALITY.</p> <p>DO YOU CLAIM THIS PREFERENCE?    YES_____</p> <p>SPECIFY LINE NUMBER(S) : _____</p> <p>_____</p> <p>SPECIFY LOCATION WITHIN LOUISIANA WHERE THIS PRODUCT IS MANUFACTURED, PRODUCED, GROWN OR ASSEMBLED: _____</p> <p>_____</p> <p>(NOTE: IF MORE SPACE IS REQUIRED, INCLUDE ON SEPARATE SHEET.)</p> <p>DO YOU HAVE A LOUISIANA BUSINESS WORKFORCE?    YES_____      NO_____</p> <p>IF SO, DO YOU CERTIFY THAT AT LEAST FIFTY PERCENT (50%) OF YOUR LOUISIANA BUSINESS WORKFORCE IS COMPRISED OF LOUISIANA RESIDENTS?</p> <p>YES_____      NO_____</p> <p>FAILURE TO SPECIFY ABOVE INFORMATION MAY CAUSE ELIMINATION FROM PREFERENCES. PREFERENCES SHALL NOT APPLY TO SERVICE CONTRACTS.</p> <p>8 CERTIFICATION OF NO SUSPENSION OR DEBARMENT. BY SIGNING AND SUBMITTING ANY BID FOR \$25,000 OR MORE, THE BIDDER CERTIFIES THAT THEIR COMPANY, ANY SUBCONTRACTORS, OR PRINCIPALS ARE NOT SUSPENDED OR DEBARRED BY THE GENERAL SERVICES ADMINISTRATION (GSA) IN ACCORDANCE WITH THE REQUIREMENTS IN OMB CIRCULAR A-133.</p> <p>A LIST OF PARTIES WHO HAVE BEEN SUSPENDED OR DEBARRED CAN BE VIEWED VIA THE INTERNET AT <a href="http://WWW.EPLS.GOV">WWW.EPLS.GOV</a></p> <p>9 EVERY ITEM BID SHOULD HAVE SUFFICIENT INFORMATION ENCLOSED WITH THE BID, IN ORDER TO DETERMINE QUALITY, SUITABILITY, AND COMPLIANCE WITH THE SPECIFICATIONS. THE ABOVE REQUIREMENTS INCLUDE ITEMS IN WHICH THE BIDDER STATES HE PROPOSES TO FURNISH EXACTLY WHAT IS CALLED FOR IN THE SPECIFICATIONS.</p> <p>FAILURE TO COMPLY WITH THIS REQUEST MAY ELIMINATE YOUR BID FROM CONSIDERATION.</p>			

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LITERATURE AND/OR SPECIFICATIONS MUST BE SUBMITTED UPON REQUEST; IF REQUESTED, LITERATURE AND/OR SPECIFICATIONS MUST BE SUBMITTED WITHIN TWENTY-FOUR (24) HOURS.

11

SAMPLE(S) MAY BE REQUIRED. WHEN REQUESTED, SAMPLES MUST BE FURNISHED AT VENDOR'S EXPENSE, AND RECEIVED NOT LATER THAN 10 DAYS AFTER REQUEST. PACKAGES SHOULD BE CLEARLY LABELED WITH THE FILE NUMBER. EACH INDIVIDUAL SAMPLE WITHIN THE PACKAGE MUST BE CLEARLY LABELED WITH BIDDER'S NAME, MANUFACTURER'S BRAND NAME AND NUMBER, FILE NUMBER AND ITEM REFERENCE. SUBMIT ONLY ONE BID PROPOSAL'S SAMPLES PER BOX. SAMPLES OF SUCCESSFUL BIDDER WILL BE RETAINED AT THE PURCHASING OFFICE OR THE USING AGENCY FOR THE PURPOSE OF RECEIVING MERCHANDISE. ANY PART OF MERCHANDISE RECEIVED THAT DOES NOT MEET THE QUALITY STANDARDS AND CONSTRUCTION OF THE SAMPLE WILL BE REJECTED AND RETURNED AT VENDOR'S EXPENSE.  
  
 ANY OTHER SAMPLES RECEIVED, IF NOT DESTROYED IN TESTING, MAY BE RETURNED AT THE BIDDER'S EXPENSE. REQUEST FOR RETURN, SHIPPING AUTHORIZATION, AND SUFFICIENT RETURN POSTAGE MUST BE RECEIVED NO LATER THAN 10 DAYS AFTER RECEIPT OF SAMPLES, OR COMMODITIES SHALL BE DISPOSED OF BY THE STATE OF LOUISIANA.

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SCOPE OF CONTRACT  
  
 SUBMITTAL OF ANY TERMS AND CONDITIONS CONTRARY TO THOSE OF THE STATE OF LOUISIANA MAY CAUSE YOUR BID TO BE REJECTED. BY SIGNING BELOW, TERMS AND CONDITIONS WHICH MAY BE INCLUDED IN YOUR BID ARE NULLIFIED, AND CONTRACTOR AGREES THAT THIS CONTRACT SHALL BE CONSTRUED IN ACCORDANCE WITH AND GOVERNED BY THE LAWS OF THE STATE OF LOUISIANA.  
  


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 BIDDER SIGNATURE

13

THE PURCHASING AGENCY RESERVES THE RIGHT TO INSPECT AND TEST THE DELIVERED MERCHANDISE FOR COMPLIANCE WITH THE BID SPECIFICATIONS. IF MERCHANDISE FAILS TO MEET THE SPECIFICATIONS, THE COST OF TEST AND INSPECTION WILL BE PAID BY THE CONTRACTOR. IF THE MERCHANDISE IS IN COMPLIANCE, COST OF ALL TEST WILL BE PAID BY THE USING AGENCY.

14

DELIVERY IS OF THE ESSENCE AND THE STATE RESERVES THE RIGHT TO AWARD TO THAT VENDOR WHICH PROVIDES THE EARLIEST POSSIBLE DELIVERY DATE. THE STATE ALSO RESERVES THE RIGHT TO REJECT ANY AND ALL VENDORS WHO CAN NOT MAKE DELIVERY AS REQUIRED.  
 NOTE: ALL ITEMS MUST BE DELIVERED AND INVOICED BY JUNE 18, 2010.  
  
 STATE EARLIEST POSSIBLE DELIVERY DATE: \_\_\_\_\_ .

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IT SHALL BE DISTINCTLY AGREED AND UNDERSTOOD THAT THE PRICE QUOTED MUST BE A FIRM PRICE, AND NOT BE SUBJECT TO CHANGE AT TIME OF SHIPMENT.

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<div><div></div><div>16 BID PRICES MUST BE FIRM FOR A PERIOD OF SIXTY (60) DAYS FROM DATE OF BID OPENING.</div></div>			

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00001	<p>UNLESS SPECIFIED ELSEWHERE SHIP TO: HUNT CORRECTIONAL CENTER - GRANTS ATTN: GRANTS PROGRAM 6925 HIGHWAY 74 ST. GABRIEL , LA 70776</p> <p>COMMODITY CODE: 465-25-000000</p> <p>***** INSTRUCTION TO BIDDERS ***** THIS IS A FAX BID. SEE BID DELIVERY INSTRUCTIONS PAGE 4 OF THIS DOCUMENT.</p> <p>DELIVERY: DELIVERY IS OF THE ESSENCE AND THE STATE RESERVES THE RIGHT TO AWARD TO THAT VENDOR WHICH PROVIDES THE EARLIEST POSSIBLE DELIVERY DATE.</p> <p>ALL ITEMS MUST BE DELIVERED AND INVOICED BY JUNE 18, 2010.</p> <p>THE STATE RESERVES THE RIGHT TO REJECT ANY AND ALL VENDORS WHO CANNOT MAKE DELIVERY AND SUBMIT INVOICE(S) AS REQUIRED.</p> <p>STATE DELIVERY DATE: _____</p> <p>SPOT LXI MONITOR, BLOOD PRESSURE, SP02, 4000 THERMOMETER</p> <p>*MEASURES BLOOD PRESSURE IN APPROX 15 SECONDS *4000 EAR THERMOMETER *PULSE OXIMETRY *MANUALLY ENTER WEIGHT, HEIGHT, REPIRATION RATE, AND PAIN LEVEL *UNIT WILL CALCULATE BODY MASS INDEX *MEMORY HOLDS UP TO 50 READINGS FOR RETRIEVAL OF PREVIOUS DATA *CONNECTIVITY READY *ERROR MESSAGES SHOW DESCRIPTIONS AND REAL SOLUTIONS *LCD DISPLAY</p> <p>BRAND/ITEM: MFG - WELCH ALLYN INC DIRECT SUPPLY ITEM #86157 OR EQUAL</p>	21	EACH		



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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00002	SPECIFY BRAND (& NUMBER IF APPLICABLE)  COMMODITY CODE: 465-23-000000 HANDHELD PULSE OXIMETER *APPROX UNIT MEASUREMENTS: 3-1/4"W X 1-1/2"D X 6-3/4"H W/O BOOT *APPROX WEIGHT: 16.5 OZ WITH BATTERIES *UL 544 LISTED, CSA 125 APPROVED *OXIMETER IS TRANSPORTABLE AND DESIGNED TO FIT INTO THE PALM OF THE HAND *UNIT MEASURES AMOUNT OF OXYGEN SATURATION IN THE BLOOD HEMOGLOBIN VIA USE OF THE PULSE *LED NUMERALS *QUANTITATIVE PULSE STRENGTH BAR DEPICTS ACTUAL SIGNAL STRENGTH FOR INDICATION OF PULSE STRENGTH AND PROFUSION STATUS *SOFTWARE CORRECTS BACKGROUND NOISE FOR ARTIFACT RECOGNITION *ON-OFF CONTROLS *AUTO SHUT OFF FEATURE TURNS UNIT OFF WHEN FINGER IS REMOVED FROM PROBE *THREE C CELL ALKALINE OR NICA BATTERIES PROVIDE 24 HOURS OF CONITNUOUS RUN TIME OR 1500 SPOTCHECKS *UNIT COMES COMPLETE WITH OXIMETER, FINGER PROBE, BOOT, 3 BATTERIES AND OPERATION MANUAL  SPECIFICATIONS: *SP02 LED NUMERIC DISPLAY 0.431I, PULSE RATE LED NUMERIC DISPLAY 0.375 PULSE STRENGTH: LOGARITHMICALLY SCALED 8 SEGMENT BARGRAPHSP02 *RANGE: 0-99% *ACCURACY: +/- 2% AT 70-99%, <70% UNSPECIFIED *PULSE RATE RANGE: 30 TO 254 BPM *ACCURACY: +/- 2% AT 30 TO 254 BPM	10	EACH		

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00003	<p><b>*MEMORY: 99 RESIDENT READINGS</b></p> <p>_____            BRAND/ITEM: MFG SMITHS MEDICAL ASD, INC            DIRECT SUPPLY ITEM #17025-7, OR EQUAL</p> <p>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)            _____</p> <p>COMMODITY CODE: 465-78-000000</p> <p>STAND-MOUNTED ASPIRATOR, CONSTANT &amp; INTERMITTENT SUCTION PUMP</p> <p><b>*PUMP MEASUREMENTS (APPROX):</b>            33"H X 17"D X 23" W  <b>*ABILITY TO SWITCH BETWEEN CONSTANT &amp; INTERMITTENT VACUUM</b>  <b>*PUMP MAINTAINS SEPARATE COLLECTION SYSTEMS FOR EACH OF THE TWO MODE SELECTIONS (CONSTANT/INTERMITTENT) TO PROVIDE SUCTION FOR ALL PROCEDURES WITH ONE VERSATILE VACUUM SOURCE.</b></p> <p><b>PUMP OPERATION (COMPLETED IN 4 STEPS):</b></p> <p><b>*SET THE MODE SWITCH</b>  <b>CONSTANT/INTERMITTENT</b>  <b>*SET THE INTERMITTENT TIMING</b>  <b>*TURN ON THE POWER</b>  <b>*ADJUST THE VACUUM LEVEL</b></p> <p><b>*115 VAC/60 HZ, SINGLE PHASE, 4.0 AMPS</b>  <b>1/8 HP MOTOR</b>  <b>*UL LISTED AND CSA CERTIFIED</b></p> <p><b>*TWO GLASS COLLECTION BOTTLES</b>  <b>(ONE 2100ML AND ONE 1100ML)</b>  <b>*COMPLETE WITH STAND</b></p> <p><b>*PERFORMANCE SPECIFICATIONS:</b>  <b>CONSTANT MODE: VACUUM RANGE - 0-250 MM HG, ADJUSTABLE ON/OFF CYCLE TIME -</b>  <b>ON: 5 TO 90 SECONDS</b>  <b>INTERMITTENT MODE: VACUUM RANGE - 0-200 MM HG, ADJUSTABLE ON/OFF CYCLE TIME -</b>  <b>OFF: 12 SECONDS</b></p>	3	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00004	*FLOW RATE: 20 LPM CONSTANT, 3 TO 4 LPM INTERMITTENT MODE COMPRESSOR: DIAPHRAGM  *WARRANTY: 1 YEAR  BRAND/ITEM: MFG - ALLIED HEALTHCARE PROD DIRECT SUPPLY ITEM #03138-2, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)  _____  COMMODITY CODE: 465-78-000000  REPLACEMENT DISPOSABLE COLLECTION BOTTLE  CANISTERS ARE TO BE USED WITH ITEM IN LINE 00003  *1100 ML DISPOSABLE COLLECTION BOTTLE (CANISTERS) *APPROX SIZE: 4-1/2" DIA X 8"H *12 PER CASE  *POSITIVE HYDROPHOBIC FILTER AUTOMATICALLY SHUTS OFF SUCTION ONCE FLUID OR FOAM REACHS FILTER, CANISTER TO BE LEAK TIGHT FOR FINAL DISPOSAL  BRAND/ITEM: MFG - ALLIED HEALTHCARE PRODUCTS, DIRECT SUPPLY ITEM # 03621, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)  _____	6	CASE	_____	_____
00005	COMMODITY CODE: 465-79-000000  FINGERTIP PULSE OXIMETER WITH BOOT  *APPROX MEASUREMENTS: 2 1/4" X 1 1/4" X 1 1/2" *APPROX WEIGHT: 1.75 OZ WITH BATTERIES	15	EACH	_____	_____

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00006	<p> <b>*INCLUDES: AAA BATTERIES (FOR 30 HOURS CONTINUOUS USE) &amp; LANYARD</b>  <b>*3 YEAR WARRANTY</b>  <b>*PULSE OXIMETER DOES NOT NEED TO BE CALIBRATED</b> </p> <p> <b>*PERFORMANCE SPECIFICATIONS:</b>  <b>SPO2 ACCURACY: +/-2% AT 80-99%:</b>  <b>+/-3% AT 70-80%</b>  <b>*PULSE RATE ACCURACY: +/-2% OR 2 BPM FROM 30-235 BPM</b>  <b>*PULSE RATE RANGE: 30-235</b>  <b>*SPO2 RANGE: 0-100%</b> </p> <p> <b>*PULSE OXIMETER MEASURES THE OXYGEN LEVEL IN BOTH THE ARTERIES AND VEINS</b> </p> <p> <b>FEATURES:</b>  <b>*SIX DISPLAY SCREEN OPTIONS</b>  <b>*AUTOMATICALLY SHUTS OFF AFTER 8 SECONDS</b>  <b>*INCLUDES PROTECTIVE RUBBER BOOT</b> </p> <p> <b>BRAND/ITEM: DIRECT SUPPLY</b>  <b>ITEM #25369 OR EQUAL</b> </p> <p> <b>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</b> </p> <hr/> <p> <b>COMMODITY CODE: 465-78-000000</b> </p> <p> <b>PORTABLE ASPIRATOR SUCTION MACHINE</b>  <b>SINGLE ROTARY COMPRESSOR</b> </p> <p> <b>*APPROX MEASUREMENTS: 12"H X 9"D X 12"W</b>  <b>*FLOW RATE: 40 IPM</b>  <b>*VACUUM RANGE: 0" HG - 25" HG</b>  <b>*MOTOR: 1/10 HP SINGLE ROTARY COMPRESSOR</b>  <b>*APPROX WEIGHT: 14.5 LBS</b>  <b>*WARRANTY: 1 YEAR LIMITED</b> </p> <p> <b>*ASPIRATOR IS INVALUABLE FOR BRONCHOSCOPIC SUCTION AND MUCUS REMOVAL</b>  <b>*DESIGNED FOR GENERAL SUCTION USE</b>  <b>*LIGHT WEIGHT, COMPACT &amp; COMPLETE SELF CONTAINED</b>  <b>*SYSTEM INCLUDES A GAUGE AND SUCTION-REGULATING VALVE THAT WILL CREATE UP</b> </p>	9	EACH		

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	TO 25" HG VACUUM *COMPLETE WITH HOSPITAL GRADE PLUG *1500 ML DISPOSABLE CANISTER & FILTER TO PREVENT FLUID AND AEROSOL CONTAMINATION *PROVIDE CONSTANT SUCTION *UL LISTED AND ULC CERTIFIED  BRAND/ITEM: MFG - ALLIED HEALTHCARE PROD DIRECT SUPPLY ITEM #03136-2, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)				
00007	COMMODITY CODE: 465-50-000000  PRIVACY SCREEN W/CASTERS  *"S-SHAPE" *LIGHTWEIGHT FRAME *EACH SECTION MEASURES 19"W X 68"H *THREE SECTION SCREEN W/ CASTERS  *COLOR: GREEN  BRAND: OMNIMED ITEM #13151, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)	2	EACH		
00008	COMMODITY CODE: 465-50-000000  DESIGNER CLOTH PANELS  *PANELS ARE FLAME RESISTANT AND MACHINE WASHABLE *COLOR: GREEN *APPROX DIMENSIONS: 27" W X 52" H  BRAND: OMNIMED ITEM #13153, OR EQUAL	6	EACH		

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00009	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ _____ COMMODITY CODE: 465-94-000000 THERMOMETER, ORAL PROBE *BLUE ORAL PROBE *ORAL TEMPERATURE: 4 SECONDS *RECTAL TEMPERATURE: 10 SECONDS *AXILLARY TEMPERATURE: 15 SECONDS *LARGE LCD DISPLAYS TEMPERATURES IN FAHRENHEIT OR CELSIUS *INCLUDES A LAST TEMPERATURE RECALL FEATURE *TEMPERATURE RANGE OF 80 TO 100 DEGREES *WATERPROOF, STAINLESS STEEL PROBE SHAFT *THERMOMETER HAS STORAGE HOUSING FOR 25 PROBE COVERS *REMOVABLE, COLOR-CODED PROBE MINIMIZES THE RISK OF CROSS-CONTAMINATION *INCLUDES ORAL PROBE *RUBERIZED GRIPS *USER-SELECTABLE ICON AND/OR WORDS FOR IDENTIFICATION OF THERMOMETER MODES *BATTERY LIFE INDICATOR *OPERATES ON THREE AA BATTERIES WITH AN APPROXIMATE LIFE OF 6000 READINGS *2 YEAR WARRANTY ON THERMOMETER *1 YEAR WARRANTY ON PROBE *BRAND/ITEM: SURE TEMP PLUS, MFG - WELCH ALLYN INC, DIRECT SUPPLY ITEM # 72889 OR EQUAL SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	10	EACH	_____	_____
00010	COMMODITY CODE: 465-94-000000 ORAL/AXILLARY COMPLETE THERMOMETER	10	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00011	*ELECTRONIC THERMOMETER *ORAL AND AXILLARY THERMOMETER *PROVIDES READINGS IN LESS THAN 4 SECONDS, ADVANCED ACCURACY READING IN LESS THAN 6 SECONDS *COMPACT DESIGN STANDS UPRIGHT ON A FLAT SURFACE *ICON-BASED INTERFACE SYSTEM WITH BACKLIGHT LCD DISPLAY, TEMPERATURE STATUS INDICATORS AND LAST TEMPERATURE RECALL FUNCTION *MEASUREMENT RANGE 80-109 DEGREES FAHRENHEIT *OPERATES ON 4 AA BATTERIES FOR 6000 MEASUREMENTS *EQUIPPED WITH ELECTRONIC ANTI-THEFT SYSTEM, SELF-CALIBRATING ELECTRONICS AND AUTO ON-OFF FUCTION *THERMOMETER INCLUDES ON BOX OF 20 PROBE COVERS *INCLUDES ORAL PROBE AND PUSH-BUTTON PROBE COVER EJECTION  BRAND: FILAC 3000 EZ MFG: KENDALL HEALTHCARE DIRECT SUPPLY ITEM #17420, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)  _____  COMMODITY CODE: 465-95-000000  INTELLIPAP CPAP WITH HEATED HUMIDIFIER:  * APPROX 6.4" H X 6.5" W X 8.4" D * APPROX 4.45 LBS W/HEATED HUMIDIFIER * MIN 3 YEAR WARRANTY ON CPAP * MIN 2 YEAR WARRANTY ON HUMIDIFIER * INTEGRATED HEATED HUMIDIFIER DOCKS AT BOTTOM OF CPAP, WITH BUILT-IN OVERFILL PROTECTION * WATER INGRESS PROTECTION PREVENTS HUMIDIFIER WATER FROM DAMAGING THE CPAP * ACCOMODATES VARIOUS TUBING LENGTHS (6 AND 10 FT) * SLIP-RESISTANT PADS ON BOTTOM OF UNIT * THREE LARGE BUTTONS CONTROL ALL FUNCTIONS FOR SIMPLIFIED PATIENT	5	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	OPERATION * LARGE, BACKLIT LCD W/PATIENT MENU * AUTO ON/OFF AUTOMATICALLY STARTS THE FLOW OF AIR AFTER BREATHING INTO THE MASK AND STOPS WHEN MASK IS REMOVED (FUNCTION CAN BE DISABLED) * DELAY PRESSURE RAMP EASES THE MACHINE TO PRESCRIBED PRESSURE - ALLOWING USER TO FALL ASLEEP AT A LOWER PRESSURE (0 TO 45 MINUTES IN 5 MINUTE INCREMENTS, AND .5 INCREMENTS FOR PRESSURE) * COMPLIANCE TRACKING ENCODES USAGE DATA THAT CAN BE COMMUNICATED TO CLINICIAN, AND THEN TRANSLATED * REMINDERS ALERT TO THE NEED TO REPLACE OR CHECK PARTS * PRODUCT RANGE: 3-20 CM H20 (.5 INCREMENTS) * MAX 26 DBA OPERATION NOISE * MIN 8 FT AC POWER CORD * AUTOMATIC LEAK COMPENSATION * MOTOR HOUR METER * THERAPY COMPLIANCE METER * INCLUDES EXTRA AIR INLET AND FINE PARTICLE FILTER * INCLUDES CARRYING BAG  MFG: DEVILBISS HEALTHCARE DIRECT SUPPLY ITEM #20320, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)  _____				
00012	COMMODITY CODE: 465-95-000000  BIPAP AUTO PR SERIES BI-FLEX WITH HUMIDIFIER, SD CARD:  * DOWNLOAD CAPACITY & HEATED HUMIDIFIER * PRESSURE: 4 TO 25 CM H20 * RAMP TIME: 0 TO 45 MINUTES (5 MINUTES INCREMENTS) * STARTING RAMP PRESSURE: 4 CM H20 TO EPAP; PATIENT ADJUSTABLE * APPROX DIM: 7.5" L X 5.0" W X 3.1" H * APPROX WEIGHT: 2.2 LBS * FILTERS: POLLEN & ULTRA-FINE	5	EACH		



PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	* DEVICE SET UP - LCD KEYPAD * DATA STORAGE CAPACITY: (MINIMUM) DISPLAY: 7 AND 30 DAY AVERAGES * DATA STORAGE CONTENT: INCLUDES SMART CARD TO RECORD DATE/TIME, HOURS OF USAGE PATTERNS, AHI, LEAK, SNORE, FOSQ, APEAS. * DATA CAN BE DOWNLOADED TO SOFTWARE * SMARTCARD: 6 MONTHS AT 3 USAGE SESSIONS PER DAY, 7 DAYS IN-DEPTH ANALYSIS * COMPLIANCE MONITORING: BREATHING DETECTION * ALTITUDE COMPENSATION: AUTOMATIC * ELECTRICAL REQUIREMENTS: 100-240 VAC 50/60 HZ * HUMIDIFICATION: INCLUDES HEATED HUMIDIFIER * DC POWER: DIRECT-CONNECT CORD * MIN WARRANTY: 2 YEARS * INCLUDES: LIGHTED LEDS, AUTO ON/OFF, MASK OFF ALERT, PATIENT REMINDERS * REQUIRES SMART CARD READER (NOT INCLUDED)  MFG: RESPIRONICS DIRECT SUPPLY ITEM #37246, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)				
00013	COMMODITY CODE: 465-50-000000  ISOLATION STATION:  * APPROX DIM: 26" W X 45" H X 15" D * 4 DUAL-WHEEL CASTERS FOR STATION MOBILITY; 2 CASTERS TO BE LOCKING * 3 DRAWERS FOR STORAGE OF ISOLATION SUPPLIES - EACH APPROX 7" H X 19" W X 14" D * TOP WRITING SURFACE, APPROX 26" X 15" * SLIDING BACKBOARD FOR MOUNTING HAND SANITIZERS AND GLOVE BOX HOLDERS, APPROX 12" X 6" * ALL-PLASTIC SURFACES FOR EASE OF CLEANING	5	EACH		

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00014	* MIN 5 YEAR WARRANTY ON PIPE & FITTINGS * MIN 2 YEAR WARRANTY ON CASTERS AND PARTS  MFG: INNOVATIVE PRODUCTS UNLIMITED DIRECT SUPPLY ITEM #19589-13, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____  COMMODITY CODE: 465-37-000000  3.5V COAXIAL DIAGNOSTIC SET:  * INCLUDES HARD PROTECTIVE CARRYING CASE * RECHARGEABLE HANDLE * SET INCLUDES HALOGEN COAXIAL OPHTHAL-MOSCOPE * SET INCLUDES MACROVIEW OTOSCOPE/THROAT ILLUMINATOR  MFG: WELCH ALLYN INC DIRECT SUPPLY ITEM #64634, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	5	EACH	_____	_____
00015	COMMODITY CODE: 465-02-000000  TWIN FLOWMETERS: AIR ADAPTER/DOUBLE AIR ADPT X2  * CONSISTS OF TWO PRESSURE COMPENSATED FLOWMETERS MOUNTED ONTO A METAL "Y" ADAPTER, TO PROVIDE ACCURATE GAS FLOW MEASUREMENT AND CONTROL OF OXYGEN AND AIR * COMPACT DESIGN; CAN ACCOMMODATE DOUBLE HUMIDIFIERS AND NEBULIZERS * SHROUD LOCKS ONTO THE BASE FOR SAFETY * 1-15 L/MIN FLOWMETER HAS DUAL-TAPERED	10	EACH	_____	_____

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	<b>FLOWTUBE</b> * DOUBLE SCALE WITH LARGE EASY-TO-READ INCREMENTS * MAXIMUM FLOW LIMITED TO 5 L/MIN * INCREMENTS CALIBRATED TO + 1/8 L/MIN * FLOWMETERS ARE CALIBRATED AT 50 PSI * FLOWTUBE AND SHROUD ARE MADE OF POLY-CARBONATE  <b>TECHNICAL SPECIFICATIONS:</b> * APPROX WEIGHT: 1 LB 2 OZ * WARRANTY: LIFETIME ON FLOWTUBE AND SHROUD COMPONENTS; 10 YEAR ON ENTIRE FLOWMETER AND OTHER COMPONENTS * CALIBRATION PRESSURE & TEMPERATURE: 50 PSIG (320 KPA) AND 70 DEGREE F AS SPECIFIED ON THE FLOWMETER LABEL * MAXIMUM PRESSURE: 100 PSIG (690 KPA)  <b>MANUF: OHIO MEDICAL CORPORATION</b> <b>PREVENTIVE MAINTENANCE SERVICE CORP</b> <b>ITEM # AIR ADPTX2, OR EQUAL</b>  <b>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</b> _____				
00016	<b>COMMODITY CODE: 465-02-000000</b>  <b>TWIN FLOWMETERS:</b> <b>02 ADAPTER/DOUBLER</b>  <b>** SAME SPECS AS LINE 15</b>  <b>MANUF: OHIO MEDICAL CORPORATION</b> <b>PREVENTATIVE MAINTENANCE SERVICE CORP</b> <b>ITEM # O2 ADPTX2, OR EQUAL</b>  <b>SPECIFY BRAND (&amp; NUMBER IF APPLICABLE)</b> _____	20	EACH	_____	_____
00017	<b>COMMODITY CODE: 465-02-000000</b>	10	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	TWIN FLOWMETERS: VACUUM INLET DOUBLER  ** SAME SPECS AS LINE 15  MANUF: OHIO MEDICAL CORPORATION PREVENTATIVE MAINTENANCE SERVICE CORP ITEM # VAC ADPTX2, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00018	COMMODITY CODE: 465-02-000000  MEDICAL AIR FLOWMETER  TECHNICAL SPECIFICATIONS: *APPROX DIM: 5.5"H X 1"W X 3.4" D *APPROX WEIGHT: 5.6 OZ *MAXIMUM PRESSURE: 100 PSIG (690 KPA) *INCREMENTS: 0 TO 5 L/MIN (FROM 0.5 TO 5 /MIN); 1 L/MIN (FROM 5 TO 15 L/MIN) *ACCURACY: +/- 0.5 L/MIN OR +/- 10% OF READING (WHICHEVER IS GREATER) *MINIMUM "FLUSH" FLOW RATE: 50 L/MIN *MAXIMUM FLOW RATE: 50 L/MIN *POWER OUTLET FLOW RATE: MINIMUM 150 L/ MIN WITH ADEQUATE SUPPLY FLOW *DESIGNED TO MEET STRICT STANDARDS OF DURABILITY AND PRECISION *BASE IS CONSTRUCTED OF SOLID BRASS AND SILK SCREEN FINISH *WARRANTY: 5 YEARS  BRAND/ITEM: OHIO MEDICAL CORP. CLINICAL PRODUCT 7700 SERIES, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	25	EACH		
00019	COMMODITY CODE: 465-23-000000	3	EACH		

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	<b>PULSE OXIMETER</b>  *SLEEP HAND-HELD *DESIGNED FOR OVERNIGHT SLEEP SCREENING *BUILT-IN PRINTER ALLOWS SUMMARY RESULTS TO BE PRINTED AT THE TOUCH OF A BUTTON *FAST, RELIABLE SP02, PULSE RATE AND PULSE STRENGTH SPOT-CHECKING *MUST BE COMPATIBLE WITH ALL BCI REUSABLE AND DISPOSABLE PULSE OXIMETRY SENSORS AND SLEEP SCREENING SOFTWARE *2 KEY OPERATION *POWERED BY 4 AA BATTERIES (INCLUDED)  3 MODES OF OPERATIONS *VERIFICATION MODE FOR SPOT CHECKING *DATA COLLECTION MODE FOR LONG TERM DATA COLLECTION *TREND PRINTING MODE FOR OUTPUTTING SUMMARIZED TREND DATA OR COMPLETE COMPUTER DATA DOWNLOAD  MFG: SMITH MEDICAL BRAND: BCI - FINGERPRINT ITEM #70439 MFG #3403 OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE)  _____				
00020	<b>COMMODITY CODE: 465-78-000000</b>  <b>SUCTION UNIT, ULTRA LITE</b>  *COMPLETE WITH A VACUUM GAUGE/REGULATOR AND AEROMEDICAL CERTIFICATION *APPROX WEIGHT: 5.1 LB *APPROX MEASUREMENT: 7"W X 10"D X 7"H *CREATES 550MMHG WITH 30-36 LPM AIRFLOW  *INCLUDES: 1200CC DISPOSABLE CANISTER CARRY CASE AC CHARGER DC CHARGER SUCTION TIPS	4	EACH	_____	_____

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	*1 YEAR WARRANTY  BRAND: IMPACT 321 GR PROGRESSIVE MEDICAL INTL ITEM# 11667 OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00021	COMMODITY CODE: 465-78-000000  BATTERY FOR SUCTION UNIT, ULTRA LITE  *** MUST BE COMPATIBLE WITH LINE 21 ***  BRAND/ITEM: PROGRESSIVE MEDICAL INTL ITEM# 16434 OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	4	EACH	_____	_____
00022	COMMODITY CODE: 465-78-000000  800 CC SUCTION CANNISTER  *BACTERIAL FILTER *RIGID PLASTIC BODY WITH VISUAL VOLUME MARKINGS *DOUBLE SEAL TOP  *** MUST BE COMPATIBLE WITH LINE 21 ***  BRAND: BEMIS PROGRESSIVE MEDICAL INTL ITEM# 18481 OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	40	EACH	_____	_____

PRICE SHEET		INVITATION TO BID			
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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00023	COMMODITY CODE: 465-37-000000  INTEGRATED/DIAGNOSTIC SYSTEM  *INCLUDES: OPHTHALMOSCOPE AND THERMOMETER DIAGNOSTIC OTOSCOPE WITH A HALOGEN LAMP WALL ANEROID WITH DIAL FACE CERTIFIED ACCURACY AND LIFETIME CALIBRATION PROGRAM DISPOSABLE SPECULA CONTAINER PREFILLED WITH EAR SPECULA  BRAND: WELCH ALLYN MEDLINE ITEM# W-A767912MPX OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	4	EACH	_____	_____
00024	COMMODITY CODE: 465-11-000000  HANDHELD ANEROID  *DURABLE ZINC-ALLOY SHELL *LUMINESCENT DIAL *SIZE: ADULT  BRAND: MEDLINE INDUSTRIES ITEM# MDS9410, OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	15	EACH	_____	_____
00025	COMMODITY CODE: 465-11-000000  HANDHELD ANEROID  *DURABLE ZINC-ALLOY SHELL *SIZE: CHILD	2	EACH	_____	_____

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LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
	BRAND: MEDLINE INDUSTRIES ITEM #MDS9411 OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____				
00026	COMMODITY CODE: 465-11-000000  HANDHELD ANEROID  *DURABLE ZINC-ALLOY SHELL *SIZE: LARGE ADULT  BRAND: MEDLINE INDUSTRIES MFR #: MDS9413 OR EQUAL  SPECIFY BRAND (& NUMBER IF APPLICABLE) _____	15	EACH	_____	_____
00027	COMMODITY CODE: 465-14-000000  AED G3 AUTOMATED EXTERNAL DEFIBRILLATOR  *ONE BUTTON OPERATION AND RESCUE READY TECHNOLOGY FEATURING DAILY, WEEKLY, AND MONTHLY SELF-TESTING *INSTRUCTIVE VOICE PROMPTS *LIGHTWEIGHT *7 YEAR WARRANTY ON AED  TO INCLUDE: ALARMED WALL UNIT SOFT SIDE CARRYING CASE EXTRA ELECTRODES READY KIT  BRAND: CARDIAC SCIENCE ITEM #84122 MFR #9390A-501WP OR EQUAL	4	EACH	_____	_____



PRICE SHEET		INVITATION TO BID			
NUMBER : 2240041 OPEN DATE : 05/28/10      TIME: 02:00 PM T-NUMBER :		BIDDER:			PAGE 25
LINE NO.	COMMODITY/SERVICE DESCRIPTION	QUANTITY FROM/TO	UNIT	UNIT PRICE	EXTENDED TOTAL
00028	SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ _____ COMMODITY CODE: 465-02-000000 OXYGEN CONCENTRATOR *LITER FLOW: .125 TO 5LPM *AVG. POWER CONSUMPTION: 310 WATTS *SOUND LEVEL: 40DBA TYPICAL *OUTLET PRESSURE: 7.0 PSI *LOCKABLE FLOW CONTROL VALVE *DIRECT ACCESS TO AIR INLET FILTER *ELECTRONIC HOUR METER *ALARM BATTERY *3 YEAR WARRANTY *LATEX FREE MFG: NIDEK NUVO LITE MFG #: NDKLITE3 OR EQUAL **ITEMS MUST BE RECEIVED AND INVOICED BY JUNE 18, 2010** SPECIFY BRAND (& NUMBER IF APPLICABLE) _____ _____	18	EACH	_____	_____